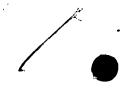
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APPLICATION NO.	CATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTOR	CONFIRMATION NO.	
10/633,540	10/633,540 08/05/2003		Hisashi Iida		2018-761		6436
TITLE OF INVENTION	: APPARATUS FOR DI	ETECTING DETERIORA	ATION OF AIR-FUEL RA	ATIO SENSOR			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	G EEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	LIEL	\$1700	10/31/2007
•	EXAMINER		CLASS-SUBCLASS		997 AUO	AUONDAF2 00000102 10633549	
OLSEN, KAJ K		ART UNIT	205-784500	61 FU:1501 62 FU:1504			1400.00 00
. Change of correspondence address or indication of "Fee Address" (37				he patent front page, list 12.00 UP			303.00 CP
CFR 1.363).		(1) the names of up to 3 registered patent attorneys 1 Nixon & Vanderhye P. (
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively, (2) the name of a single firm (having as a member a 2				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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PLEASE NOTE: Uni recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assign assignment.	ee is ide	ntified below, the do	cument has been filed for
(A) NAME OF ASSI	GNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
DENSO CORPORATION KARIYA-CITY, JAPAN							
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent) :	Individual Co	orporatio	n or other private gro	up entity Government
a. The following fee(s)	are submitted:	46	. Payment of Fee(s): (Plea	ase first reapply ar	ıy previo	ously paid issue fee s	hown above)
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			overpayment, to Depo	sit Account Number	ř <u>14</u> -	-1140 (enclose ar	extra copy of this form).
	tus (from status indicated is SMALL ENTITY statu		☐ b. Applicant is no lon	ger claiming SMAI	LL ENTI	TY status. See 37 CF	R 1.27(g)(2).
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